POSITION	INITIALS	ID NO.	DATE
	(signature)		01/04/2002
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LH	2890	1/28/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
−	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Claim Original	3-14-02	7-5-02	Date						
1	①	✔	✔							
2	②	=	=							
3	③	=	=							
4	4	=	✔							
5	⑤	=	=							
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7	⑦	✔	=							
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If more than 150 claims or 10 actions
staple additional sheet here

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